

QUARTERLY HATE CRIME REPORT
Offenses Known to Law Enforcement

Form Approved
OMB No. 1110-0015
Approved through 5/31/97

Summary Page

This report is authorized by Title 28, Section 534, U.S. Code, and the Hate Crime Statistics Act of 1990. Your cooperation in using this form to report hate crimes known to your department will assist the FBI in compiling comprehensive and accurate data regarding incidence and prevalence of Hate Crime throughout the Nation. Please submit this report on a quarterly basis, by the 15th day after the close of the quarter, to Federal Bureau of Investigation, Criminal Justice Information Services Division, Attention: Uniform Crime Reports/Module E-3, 1000 Custer Hollow Road, Clarksburg, WV 26306.

City	County	State
Name of Agency	Agency Identifier (ORI)	
Name of Preparer	Title	
Quarter and Year of Report: January-March		April-June
July-September		October-December
Year		
Total number of incidents reported in this quarter		
If there were no hate crimes in this quarter, check this box.		

Deletion of incident(s) previously reported [Applicable only for deletion of entire incident(s)].

Incident Number

Date of the Incident

| |

Month Day Year

Month Day Year

Month Day Year

Month Day Year

Month Day Year

NOTE: Public reporting for this collection of information is estimated to average .17 hours per response, including the time for reviewing. Send comments regarding this burden estimate or any other aspect of this collection of information including suggestions for reducing this burden to, Federal Bureau of Investigation, CJIS, ATTN: Uniform Crime Reports, 1000 Custer Hollow Road, Clarksburg, WV 26306; and to the Office of Information and Regulatory Affairs, OMB Number 1110-0015, Office of Management and Budget, Washington, D.C. 20503.

INSTRUCTIONS FOR PREPARING QUARTERLY HATE CRIME AND HATE CRIME INCIDENT REPORT

GENERAL

This report is separate from and in addition to the routine Summary UCR submission and the Hierarchy Rule does not apply. Also, in the Summary UCR system, the offenses of Intimidation and Destruction/Damage/Vandalism of Property are reported only when arrests occur. On this form, all are to be reported when they have been determined to have occurred and are bias-motivated, regardless of whether arrests have taken place. Refer to the Hate Crime Reporting Guidelines for additional information, clarification, and explanation.

SUMMARY PAGE

1. At the end of each calendar quarter, a single Summary Page, along with an individual Incident Report for each hate-motivated incident identified during the quarter (if any), should be jointly submitted. If none occurred, submit only the Summary Page.
2. The Summary Page should be used to identify your agency, to state the number of hate-related incidents being reported for the calendar quarter, and to delete any incidents previously reported which were determined during the reporting period not to be hate related.

HATE CRIME INCIDENT REPORT

3. The Incident Report should be used to report initially a hate-related incident or to adjust information in a previously reported incident.
4. Provide an identifying incident number which preferably will be your "case" or "file" number.
5. Provide codes for all offenses within the incident determined to be hate related and the number of victims for each such offense. In multiple offense incidents, report only those offenses determined to be hate related. Should more than six offenses be involved in one incident, use additional Incident Reports and make appropriate entries in the page "☐ of ☐ " portion of the form.
6. Provide the most appropriate location for each hate-related offense.
7. Provide the nature of the hate/bias motivation for each hate-related offense.
8. Provide the victim type for each offense identified within the hate-related incident.
9. Where the victim type is an "individual," indicate the total number of individual victims (persons) involved in the incident irrespective of the number of offenses in which they were involved.
10. Provide the number of offenders, if known, or report that such is unknown.
11. Provide the suspected offender's race, if known. If there was more than one offender, provide the race of the group as a whole.
12. Include on separate paper any additional comments/information you feel will add clarity to the report. (optional)

HATE CRIME INCIDENT REPORT

Initial	Adjustment	ORI	Date of Incident	Month	Day	Year
Incident No.			Page	of	of Same Incident	

UCR Offense	Offense Code	
UCR Code - # of victims	UCR Code - # of victims	01 Murder
#1 -	#4 -	07 Motor Vehicle Theft
UCR Code - # of victims	UCR Code - # of victims	02 Forcible Rape
#2 -	#5 -	08 Arson
UCR Code - # of victims	UCR Code - # of victims	03 Robbery
#3 -	#6 -	09 Simple Assault
		04 Aggravated Assault
		10 Intimidation
		05 Burglary
		11 Destruction/Damage/ Vandalism
		06 Larceny-Theft

Location (Check one for Offense #1)				
01	Air/ Bus / Train Terminal	14	Hotel /Motel / etc.	Enter Location
02	Bank / Savings and Loan	15	Jail / Prison	Code if Different
03	Bar / Night Club	16	Lake / Waterway	from Offense #1
04	Church / Synagogue / Temple	17	Liquor Store	
05	Commercial / Office Building	18	Parking Lot / Garage	#2
06	Construction Site	19	Rental Storage Facility	
07	Convenience Store	20	Residence / Home	#3
08	Department / Discount Store	21	Restaurant	#4
09	Drug Store / Dr.'s Office / Hospital	22	School / College	#5
10	Field / Woods	23	Service / Gas Station	#6
11	Government / Public Building	24	Specialty Store (TV, Fur, etc.)	
12	Grocery / Supermarket	25	Other / Unknown	
13	Highway / Road / Alley / Street			

Bias Motivation (Check one for Offense #1)				
Racial	Religious	Disability		
11 Anti-White	21 Anti-Jewish	51 Anti-Physical Disability		
12 Anti-Black	22 Anti-Catholic	52 Anti-Mental Disability		
13 Anti-American Indian/ Alaskan Native	23 Anti-Protestant			
14 Anti-Asian/Pacific Islander	24 Anti-Islamic (Moslem)	Enter Bias Motivation		
15 Anti-Multi-Racial Group	25 Anti-Other Religion	Code if Different		
Ethnicity/National Origin	26 Anti-Multi-Religious Group	from Offense #1		
32 Anti-Hispanic	27 Anti-Atheism/Agnosticism	#2		
33 Anti - Other Ethnicity/ National Origin	Sexual	#3		
Specify	41 Anti-Male Homosexual	#4		
	42 Anti-Female Homosexual (Lesbian)	#5		
	43 Anti-Homosexual (Gay & Lesbian)	#6		
	44 Anti-Heterosexual			
	45 Anti-Bisexual			

Victim Type: For each offense code listed above, check all applicable victim types.													
Victim Type:	Offense Code #1	Offense Code #2	Offense Code #3	Offense Code #4	Offense Code #5	Offense Code #6	Offense Code #1	Offense Code #2	Offense Code #3	Offense Code #4	Offense Code #5	Offense Code #6	Offense Code #6
1. Individual*							5. Religious Organization						
2. Business							6. Society / Public						
3. Financial Institution							7. Other						
4. Government							8. Unknown						
*Indicate the total number of individual victims involved in the incident :													

Number of Offenders		(Use "00" for "Unknown")	
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Suspected Offender's Race as a Group (Check one)			
1	White	3	American Indian / Alaskan Native
2	Black	4	Asian / Pacific Islander
5	Multi-Racial Group	6	Unknown

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